

## **CLAIMS AMENDMENTS**

1. (currently amended) A ~~system~~non-insurance method for the payment of service fees to service providers for services rendered to service receiverswithout subrogation, comprising the steps of:

a. having the service providers subscribe with a clearinghouse and to agree to provide services to the service receivers at fees set by the service providers and the clearinghouse agrees to collect plan fees from the service receivers

b. having the service receivers subscribe with the clearinghouse to receive services from the service providers;

c. allowing the service receivers to select a specific service provider who has subscribed to the clearinghouse to act as a primary service provider for the service receiver;

d. having the clearinghouse collect plan fees from the service receivers on a set periodical basis and distribute ~~at least a portion of the plan fees~~ less a service charge to the selected service provider on a set periodical basis as payment fees; and

e. allowing the service receivers to receive a predetermined quantity of services from the selected service provider, and

f. implementing the method such that the service receivers receive the predetermined quantity of services from the service providers during the set periodical basis for a set total fee, the service providers provide the predetermined quantity of services to the service receivers during the set periodical basis for the fee set by the service providers, and the clearinghouse collects the plan fees from the service receivers on the set periodical basis and distributes the fee set by the service providers to the service providers upon provision of the services to the service receivers less the service charge.

2. (amended) The ~~system~~method characterized in Claim 1, wherein the clearinghouse collects the plan fees from the service receivers for a set period of time.

3. (amended) The ~~system~~method characterized in Claim 2, wherein the clearinghouse distributes the payment fees to the selected service provider for a set period of time.

4. (amended) The ~~system~~method characterized in Claim 3, wherein the selected service provider provides a predetermined type of service to the service receivers.

5. (canceled).

6. (amended) The ~~system~~method characterized in Claim 1, wherein the service receivers pay a co-payment fee to the selected service provider when the service receivers receive the services from the selected services provider.

7. (canceled).

8. (amended) The ~~system~~method characterized in Claim 1, wherein if the service receiver is provided services from a service provider who has subscribed to the clearinghouse but who has not been designated as the primary service provider for the service receiver, the service receiver pays to the non-primary service provider a service fee and the non-primary service provider receives a fee from the clearinghouse.

9. (amended) The ~~system~~method characterized in Claim 1, wherein if the service receiver receives services from a service provider that is not subscribed to the clearinghouse, no fee is paid to the service provider by the clearinghouse and the service receiver is liable for the service providers entire fee.

10. (amended) The ~~system~~method characterized in Claim 5, wherein if the service receiver receives services from the selected service provider in a quantity greater than the predetermined quantity, no fee is paid to the selected service provider by the clearinghouse for any services over the predetermined quantity and the service receiver is liable for the selected service providers' entire fee.

11. (amended) The ~~system~~method characterized in Claim 5, wherein if the service receiver receives services from the selected service provider in a quantity greater than the predetermined quantity, no fee is paid to the selected service provider by the clearinghouse for any services over the predetermined quantity and the service receiver is liable for the selected service providers' fee at a reduced rate.

12. (amended) The ~~system~~method characterized in Claim 1 in combination with an insurance coverage product.

13. (amended) The ~~system~~method characterized in Claim 1, wherein the service providers are doctors and the service receivers are patients.

14. (canceled).

15. (canceled).

16. (canceled).

17. (canceled)

18. (currently amended) A non-insurance method for the payment of medical service fees to doctors for medical services rendered to patients without subrogation, comprising the steps of:

- a. having the doctors subscribe with a clearinghouse to provide a predetermined quantity of medical services to the patients;
- b. having the patients subscribe with the clearinghouse to receive medical services from the doctors;
- c. allowing the patients to select a specific doctor who has subscribed to the clearinghouse to act as a primary care doctor for the patient whereby the primary care doctor agrees to provide medical services to the patient, wherein the primary care doctor sets their own fee schedules for the medical services rendered to the patients and are paid by the clearinghouse according to the fee schedule;
- d. having the clearinghouse collect plan fees from the patients on a set periodical basis for a set period of time and distribute ~~at least a portion of the plan fees~~ less a service charge to the primary care doctor on a set periodical basis for a set period of time as payment fees; ~~and~~
- e. allowing the patients to receive a predetermined quantity of medical services from the primary care doctor; ~~and~~;
- f. \_\_\_\_\_

~~wherein the primary care doctors set their own fee schedules for the medical services rendered to the patients and are paid by the clearinghouse according to the fee schedule~~ implementing the method such that the patients receive the predetermined quantity of medical services from the doctors during the set periodical basis for a set total fee, the doctors provide the predetermined quantity of medical services to the patients during the set periodical basis for the fee set by the doctors, and the clearinghouse collects the plan fees from the patients on the set periodical basis and distributes the fee set by the doctors to the patients upon provision of the medical services to the patients less the service charge.

19. (amended) The ~~system~~ method characterized in Claim 18, wherein the primary care doctor provides a predetermined type of medical service to the patients.

20. (canceled).

21. (amended) The ~~system-method~~ characterized in Claim 20, wherein the patients pay a co-payment fee to the primary care doctor when the patients receive the medical services from the primary care doctor.

22. (new)..The ~~system-method~~ characterized in Claim 18, wherein the predetermined quantity of medical services is a predetermined number of visits to the medical offices of the primary care doctor.

23. (new) A non-insurance method for the payment of medical service fees to doctors for medical services rendered to patients without subrogation, comprising the steps of:

- a. having the doctors subscribe with a clearinghouse to provide a specific type of medical services to the patients for a set period of time;
- b. having the patients subscribe with the clearinghouse to receive medical services from the doctors;
- c. allowing the patients to select a specific doctor who has subscribed to the clearinghouse to act as a primary care doctor for the patient whereby the primary care doctor agrees to provide to the patient a predetermined quantity of visits to the medical offices of the primary care doctor, wherein the primary care doctor sets their own fee schedules for the medical services rendered to the patients and are paid by the clearinghouse according to the fee schedule;
- d. having the clearinghouse collect plan fees from the patients on a set periodical basis for a set period of time and distribute the plan fees less a service charge to the primary care doctor on a set periodical basis for a set period of time as payment fees; and
- e. implementing the method such that the patients receive the predetermined quantity of medical services from the doctors during the set period of time for a set total fee, the doctors provide the predetermined quantity of medical services to the patients during the set period of time for the fee set by the doctors, and the clearinghouse collects the plan fees from the patients on the set periodical basis during the set period of time and distributes the fee set by the doctors to the patients upon provision of the medical services to the patients less the service charge.